

STATE OF WASHINGTON

Annual Progress and Services Report

Submitted June 2003

Section V

Title IV-B-2

Promoting Safe and Stable Families

Significant Portion of Funds

Children's Administration

Department of Social and Health Services

TITLE IV-B SUBPART 2

Promoting Safe and Stable Families

Significant Portions of Funds

Washington does not use federal funds under IV-B subpart 2 to supplant federal or non federal funds for existing family preservation and support services. Children's Administration uses the Title IV-B subpart 2 funds on actual service delivery within the following four categories:

- family preservation (20%)
- community based family support (20%)
- time limited family reunification (20%),
- adoption promotion and support services (20%)

The remaining 20% is spread across programs and spent on administrative and program support. No more than 10% of the funding is spent on administrative and program support in any one-program area. CA service delivery is as follows:

- **Family Preservation: Family Preservation Services (FPS)**

Twenty percent of the funds will be allocated to family preservation to provide services through the Family Preservation Services (FPS) program.

FPS is available to families whose children face substantial likelihood of being placed outside of the home or to reunify a child with their family from out-of-home care. Like Intensive Family Preservation Services (IFPS), FPS are voluntary services. They are offered for a maximum of six months by a service provider who maintains a case load size of no more than ten families and are available to eligible families within 48 hours of referral. In addition, FPS are delivered primarily in the family home or community and are committed to reinforcing the strengths of the family. There is also a focus on empowering the family to solve problems and become self-sufficient. Services are designed to support families by strengthening their relationships with a variety of community resources.

Outcome measures include: successful connections to community resources, avoidance of new referrals to CPS or FRS within one year of services, and reductions in caretaker risk levels. Families are encouraged to provide feedback about the program via a client satisfaction questionnaire at the end of the service intervention.

Data collection difficulties prevent inclusion of outcomes in this year's reporting. That data will be incorporated into CA's 2004 submission.

- **Community Based Family Support: Alternative Response Systems (ARS)**

Twenty percent of the funds will be allocated to community based family support to provide services through the Alternative Response System.

The Alternative Response Systems (ARS) was authorized by 1997 legislation to provide services to low risk families via contracts to local providers. The population served by these providers includes families whose CPS referrals are tagged low risk or moderately low risk at intake and families for whom the overall risk level is low or moderately low after investigation.

There are a sufficient number of contracted providers to make the service available to every Children's Administration office in the state. Contracts are outcome oriented rather than fee for service. Community providers contract under one of two ARS models: Public Health Nurse (PHN) model or Social Service. The Public Health model focuses on health issues particularly with children under the age of six. The Social Service model has a broad focus, ranging from parenting classes to making referrals for housing and employment resources.

The legislation establishing ARS included a provision that the Office of Children's Administration Research completes an annual evaluation of ARS. The 2002 OCAR report identified three major issues:

- Low participation rates for clients
- Low rates of face to face contacts with clients by providers
- Low referrals rates to some providers in the State of Washington

The low participation rates and rates of face to face contracts are addressed by a 2003 contract change that requires submission of monthly status updates with the monthly billing form, noting participation rate and number of face to face contacts.

The low referral rate to some providers is being addressed with an emphasis in fiscal year 2003 to increase referrals to ARS providers after a CPS investigation is completed and the risk tag has been lowered to low or moderately low. Regional offices are also examining local utilization rates as they make decisions about reallocations to providers for the new fiscal year beginning July 1, 2003.

The new ARS contract with an effective date of January 2003 contained changes based on recommendations from an ARS work group with input from CA management team, regional business managers, regional contract managers and statewide ARS providers. Those changes include:

- families receive services for a maximum of 18 months with documented 90-day reviews to determine the family's continued eligibility;
- referred cases will remain open to CPS;

- contractors are expected to attend an annual mandatory training; and
- contracts may be terminated for failure to meet any of the contract requirements.

The yearly required training for providers this year included:

- new contracts and forms
 - exit summaries
 - engaging families in services
 - community-family support meetings
 - risk assessment for chronically neglecting families.
- **Time Limited Family Reunification: Intensive Family Preservation Services (IFPS), Foster Care Assessments and Parent-Child Visitation**

Twenty per-cent of the funds will be allocated to time limited family reunification to provide services through the IFPS, Foster Care Assessments and Parent-Child Visitation.

Intensive Family Preservation Services (IFPS)

IFPS is available to families whose children are at imminent risk of out-of-home placement or to reunify a child with their family from out-of-home care. Services are offered for a maximum of 40 days unless paraprofessionals are used, in which case services will be limited to a maximum of 90 days, as determined by client needs. The caseload size averages two families per service provider unless paraprofessionals are used; in which case a provider may average a caseload of up to five families. Services are available to eligible families within 24 hours of referral.

Outcome measures include: successful connections to community resources, avoidance of new referrals to CPS or FRS within one year of services, reduction in caretaker risk levels, reduction in length of stay for reunification cases, and placement prevention for at least 70% of the cases. Families are encouraged to provide feedback about the program via a client satisfaction questionnaire at the end of the service intervention.

Data collection difficulties prevent inclusion of outcomes in this year's reporting. That data will be incorporated into CA's 2004 submission.

Foster Care Assessment

The Foster Care Assessment Program (FCAP) provides an in depth evaluation of the child's needs, the resources of the foster parents or relative caregivers to meet those needs, identifies barriers to achieving permanency for the child and services that would assist reunification. The evaluation is summarized in the Services and Permanency Assessment Report (SPAR) which provides recommendations for services and supports for the child in their community. The recommended services often serve to strengthen

the child's current placement and may expedite permanency. The SPAR is of most assistance for children with complex behavior issues or possible misdiagnosis.

FCAP provides six months of follow-up services to assist linking the child to services to improve permanency outcomes if appropriate. FCAP can also provide additional specialized assessments for children with complex needs and/or problems. An inter-disciplinary team, which includes a child psychiatrist, pediatrician, FCAP evaluator and the child's CA social worker, meet and review the preliminary assessment prior to the SPAR completion. Once the SPAR is completed, a key person staffing is held to review the assessment, and develop a process for follow-up.

Harborview holds the CA contract for up to 336 assessments and subcontracts with 6 providers. FCAP evaluators are located in all 6 CA regions. As of June 17, 2003, 278 referrals had been made to FCAP for this fiscal year.

Initially, the target assessment population focused on children/youth in care over two years and over six years of age without a permanent plan. When that population was served, the FCAP referral criteria was expanded to include children with one or more of the following issues:

- multiple out-of-home placements
- chronic behavioral, emotional, physical, or educational problems
- at-risk of foster care drift
- over 90 days in out-of-home care
- unsuccessful efforts to be placed with a permanent family
- assessments and evaluations have been completed, but best treatment and placement options are unknown
- repeated criminal acts or offenses by the youth, including the inability to comply with court orders, treatment, or conditions of probation/parole.

Primary reasons for referrals to FCAP for this fiscal year as of June 17, 2003 are:

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| Special learning needs of child | 118 |
| Multiple Foster Care placements | 85 |
| Unsuccessful efforts to be placed with permanent family | 84 |
| Physically aggressive/ assaultive child | 81 |

Parent-Child Visitation

Parent Child Visitation contracts provide transportation and supervision for visits between children in out-of-home care and their families. This is an important support for family reunification. DSHS retains the responsibility for authorizing visits and received reports from each contractor concerning the parent child interaction during supervised visits.

- **Adoption Promotion and Support**

Twenty per-cent of the funds will be allocated to adoption promotion and support to provide services through Post Adoptive Services and Recruitment of Adoptive Homes. Adoption Incentive Funds are being used to increase adoption finalizations for legally free children in Washington. See Section IX: Adoption for a complete discussion of these services.

Addendum to Title IV-B-2: Promoting Safe & Stable Families
Significant Portion of Funds
Submitted April 2004

- **Time Limited Family Reunification: Intensive Family Preservation Services (IFPS), Parent-Child Visitation and Family Meetings**

Up to twenty per-cent of the funds will be allocated to three types of time limited family reunification services: Intensive Family Preservation Services (IFPS), parent-child visitation and family meetings.

Intensive Family Preservation Services (IFPS)

IFPS is available to families whose children are at imminent risk of out-of-home placement or to reunify a child with their family from out-of-home care. The Promoting Safe and Stable Families funds are available for IFPS services for reunification of families with children in care less than 15 months. CA uses the Social Service Payment System (SSPS) to track costs. Within SSPS, IFPS has a particular payment code with an objective choice of "reunification". Our data system can accommodate cross checking for time in care to confirm which payments are for children in care less than 15 months.

Parent-Child Visitation

Parent-child visitation contracts provide transportation and supervision for visits between children in out-of-home care and their families, essential parts of reunification plans. CA will allocate PSSF funds to this particular category of time limited reunification based on an estimate of children served during their first 15 months of out of home care.

Family Decision Making

CA convenes family meetings as a forum for engaging families in shared decision making as case plans are created. Once case specific tracking mechanisms are established for family decision making meetings, Promoting Safe and Stable Families funds may be allocated to this form of time limited family reunification services for children in out of home care for less than 15 months.